

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		A. Signature <b>The Corporation Company</b> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
1. Article Addressed to:		B. Received by (Printed Name) <b>The Corporation Company</b>	C. Date of Delivery <u>1/16/08</u>
2. Article Number (Transfer from service label)		D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:	
<b>FedEx Ground Packages Systems, Inc.</b> <b>c/o Corporation Company</b> <b>2000 Interstate Park Drive Suite 204</b> <b>Montgomery, AL 36109</b>		<input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
<b>08 cv 34 S+C</b>		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
7007 0710 0000 4260 6057			
PS Form 3811, February 2004		Domestic Return Receipt 102595-02-M-1540	